-								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO								10/12/76/					
1767601164													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			1(RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			(min	us 20=	*		X \$	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			V minus 3 =		•		X43=			OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT				+145=			OR	+290=		
* (f	the difference	in column 1 is i	less than zero, enter "0" in column 2				TOT	AL		OR	TOTAL	שיר	
. ,	10/02 C	LAIMS AS A	MENDED - PART II								OTHER THAN SMALL ENTITY		
/0/8/85 (Column 1)			(Colum			(Column 3)	SMALL E		ADDI-	OR •	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	RATE			RATE	ADDI- TIONAL FEE	
	Total	* //	Minus	**	0	=	X\$:)=	FEE	OR	X\$18=		
	Independent	• 21	Minus	***	3	-/	X43	=		OR	X86=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		+14	5=		OR	+290=	X/	
44 74								TAL			TOTAL	/ \	
	(Column 1) (Column 2) (Column 3)							FEE	<u></u>	١٠	ADDIT. FEE		
		(Column 1) CLAIMS		HIGH		(Column 3)		_	ADDI-	1		ADDI-	
8		REMAINING AFTER		NUM PREVIO		PRESENT EXTRA	RAT	Έ	TIONAL		RATE	TIONAL	
AMENDMENT B		AMENDMENT		PAID		Entito	 	•	FEE			FEE	
	Total	*	Minus	**		= .	X\$ 9)=		OR	X\$18=		
AME	Independent	*	Minus ***		C) A!A	=	X43	=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+148)=		OR	+290=		
TOTAL ADDIT. FEE									·	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
	`	CLAIMS		HIGH	EST				ADDI-			ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL FEE	
DM	Total	•	Minus	**		=	X\$ 9)=		OR	X\$18=		
ME	Indep-ndent	¢	Minus	***		=	X43	=		OR	X86=		
٥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
+145=										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
***	If the "Highest Nu The "Highest Nun	mber Previously Pa ber Previously Pai	aid For IN THI d For (Total o	S SPACE I	is less tha ent) is the	an 3, enter "3." e highest numbe			propriate box	k in co	lumn 1.		